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| TRANSMITTAL FORM (to be used for all correspondence after initial filing) | Application Number | 10/694,309 (Conf. #3568) |
| | Filing Date | 27 October 2003 |
| | First Named Inventor | Peggy E. HELLBERG |
| | Art Unit | 1614 |
| | Examiner Name | |
| Total Number of Pages in This Submission | Attorney Docket Number | 2395 US |

| ENCLOSURES (Check all that apply) | | |
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| <input type="checkbox"/> Fee Transmittal Form | <input type="checkbox"/> Drawing(s) | <input type="checkbox"/> After Allowance communication to Technology Center (TC) |
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| <input type="checkbox"/> Certified Copy of Priority Document(s) | Remarks | |
| <input type="checkbox"/> Response to Missing Parts/Incomplete Application | | |
| <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | | |

| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT | |
|--|------------------------------------|
| Firm or Individual name | Teresa J. Schultz, Reg. No. 40,526 |
| Signature | <i>Teresa J. Schultz</i> |
| Date | 16 Aug 2004 |

| CERTIFICATE OF TRANSMISSION/MAILING | | | |
|---|-------------------------|------|----------------|
| I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below. | | | |
| Typed or printed name | Barbara McKenzie | | |
| Signature | <i>Barbara McKenzie</i> | Date | 16 August 2004 |

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of: Peggy E. HELLBERG

Serial No: 10/694,309 (Conf. #3568)

Filed: 27 October 2003

Examiner:

Group Art Unit: 1614

FOR: HISTONE DEACETYLASE INHIBITORS FOR TREATING DEGENERATIVE
DISEASES OF THE EYE

**SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT
PURSUANT TO 37 C.F.R. 1.56, 1.97, AND 1.98**

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Pursuant to the duty of disclosure under 37 C.F.R. 1.56, 1.97, and 1.98, Applicants submit the patents, articles, and other information referenced in the specification as filed. The references are listed on the attached PTO Form 1449. a Copy of the U.S. patent is not enclosed.

A copy of the International Search Report issued in the PCT application, of which the present application is a 35 U.S.C. §371 application, is also included for the Examiner's convenience.

Applicants request that the listed patents, articles, and other information be considered during prosecution of this application and that they appear among the "References Cited" on any patent issuing herefrom.

Respectfully submitted,

16 Aug 2004
Date

By: Teresa J. Schultz
Teresa J. Schultz
Registration No. 40,256
817-551-4231

Address for Correspondence:
Alcon Research, Ltd.
Attn: Teresa J. Schultz
6201 S. Freeway, Mail Code Q-148
Fort Worth, TX 76134-2099

Attorney Docket No.: 2395 US



PTO/SB/08A (08-03)

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Substitute for form 1449/PTO

**INFORMATION DISCLOSURE
STATEMENT BY APPLICANT**

(Use as many sheets as necessary)

Complete if Known

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| Application Number | 10/694,309 (Conf #3568) |
| Filing Date | 27 October 2003 |
| First Named Inventor | Peggy E. HELLBERG |
| Art Unit | |
| Examiner Name | |
| Attorney Docket Number | 2395 US |

Sheet 1 of 1

U. S. PATENT DOCUMENTS

| Examiner Initials* | Cite No. ¹ | Document Number | Publication Date MM-DD-YYYY | Name of Patentee or Applicant of Cited Document | Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear |
|-----------------------|--------------------------|--|--------------------------------|--|---|
| | | Number-Kind Code ² (if known) | | | |
| | A1 | US- | | | |
| | A2 | US- | | | |
| | A3 | US- | | | |
| | A4 | US- | | | |
| | A5 | US- | | | |
| | A6 | US- | | | |
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| | A17 | US- | | | |
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| | A19 | US- | | | |

FOREIGN PATENT DOCUMENTS

| Examiner Initials* | Cite No. ¹ | Foreign Patent Document | Publication Date MM-DD-YYYY | Name of Patentee or Applicant of Cited Document | Pages, Columns, Lines, Where Relevant Passages Or Relevant Figures Appear | T ⁶ |
|-----------------------|--------------------------|---|-----------------------------------|--|---|----------------|
| | | Country Code ³ *Number ⁴ *Kind Code ⁵ (if known) | | | | |
| | A20 | WO 00/08048 A2 & A3 | 02/17/2000 | Fujisawa Pharm. | | |
| | A21 | | | | | |
| | A22 | | | | | |
| | A23 | | | | | |
| | A24 | | | | | |
| | A25 | | | | | |

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*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant. ¹ Applicant's unique citation designation number (optional). ² See Kinds Codes of USPTO Patent Documents at www.uspto.gov or MPEP 901.04. ³ Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3). ⁴ For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document. ⁵ Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST.16 if possible. ⁶ Applicant is to place a check mark here if English language Translation is attached.

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